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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

First Inventor Title

TOP-101DIV

Express Mail Label No.

EDMUND W. BROWN DAMPENING CYLINDER FOR TRANSFER MECHANISM EL741409425US

<u></u>	<u>~_</u> ~_ <u>~</u>
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application More Patent Application More Patent Application
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or
2. Applicant claims small entity status. See 37 CFR 1.27.	Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. Specification [Total Pages 23]	a. Computer Readable Form (CRF)
 Descriptive title of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix 	 b. Specification Sequence Listing on: CD-ROM or CD-R (2 copies); or paper c. Statements verifying identity of above copies
 Background of the Invention Brief Summary of the Invention 	
 Brief Description of the Drawings (if filed) 	ACCOMPANYING APPLICATION PARTS
Detailed DescriptionClaim(s)Abstract of the Disclosure	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney
	11. English Translation Document (if applicable)
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 12]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations
5. Oath or Declaration [Total Pages] a. Newly executed (original or copy)	13. Preliminary Amendment
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s)
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	(if foreign priority is claimed) Request and Certification under 35 U.S.C. 122
6. Application Data Sheet. See 37 CFR 1.76	17. Other:
18. If a CONTINUING APPLICATION, check appropriate box, and su, or in an Application Data Sheet under 37 CFR 1.76:	pply the requisite information below and in a preliminary amendment,
	(CIP) of prior application No.: 09/649/835
Prior application information: Examiner Not Yet Assigned	Group / Art Unit 3651
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure under Box 5b, is considered a part of the disclosure of the accompany reference. The incorporation <u>can only</u> be relied upon when a portion has	of the prior application, from which an oath or declaration is supplied ing continuation or divisional application and is hereby incorporated by been inadvertently omitted from the submitted application parts.
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FEE TRANSMITTAL for FY 2001		Complete if Known				
		Application Number				
IOI F I ZUU I	Filing Date					
Patent fees are subject to annual revision.		First Named Inventor	Edmund W. Brown			
		Examiner Name				
		Group Art Unit		_		
TOTAL AMOUNT OF DAYMENT	\$355.00	Attaman Casted No.	TOD MADEL			

METHOD OF PAYMENT				FE	E CALCULA	ATION (co	ntinued)		
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES Large Entity Small Entity								
Deposit Account Jansson, Shupe et al	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee	Description	on	Fee Paid	
Number	105	130	205		Surcharge - late	filing fee or	oath		
Deposit Account Name	127	127 50 227 25 Surcharge - late provisional filing fee or cover sheet							
Charge Any Additional Fee Required	139	130	139	130	Non - English sp	pecification			
Under 37 CFR §§ 1.16 and 1.17	147	2,520	147	•		•	rte reexamination		
Applicant claims small entity status. See 37 CFR § 1.27	112	920*	112		action		R prior to Examiner		
2. Payment Enclosed:	113	1,840*	113	1,840*	Requesting pub action	lication of SI	R after Examiner		
Check Credit card Money Order Other	115	110	215	55	Extension for re	ply within fire	st month		
FEE CALCULATION	116	390	216	195	Extension for re	ply within se	cond month		
1. BASIC FILING FEE	117	890	217	445	Extension for re	ply within thi	rd month		
Large Entity Small Entity	118	1,390	218	695	Extension for re	ply within for	urth month		
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	128	1,890	228	945	Extension for re		th month		
101 710 201 355 Utility filing fee 355.00	119	310	219		Notice of Appea				
106 320 206 160 Design filing fee	120	310	220	155	Filing a brief in s	support of ar	n appeal		
107 490 207 245 Plant filing fee	121	270	221	135	Request for oral hearing				
108 710 208 355 Reissue filing fee	138	1,510	138	1,510	Petition to institute a public use proceeding				
114 150 214 75 Provisional filing fee	140	110	240	55].	
SUBTOTAL (1) \$355.00	141	1,240	241	620	Petition to revive		onal		
2. EXTRA CLAIM FEES	142	1,240	242	620	Utility issue fee	•			
Fee from	143	440	243	220	Design issue fe	е			
Extra Claims below Fee Paid Total Claims 18 -20** = 0 X = 0.00 Independent 3 -3** = 0 X = 0.00		600	244						
		130	122	130	Petitions to the				
Claims State Multiple Dependent =	123	50	123	50	Processing fee under 37 CFR § 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126	180	126	180	Statement				
Code (\$) Code (\$)	581	40	581	40	Recording each (times number of		gnment per property		
103 18 203 9 Claims in excess of 20	146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))				
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid	149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))				
109 80 209 40 ** Reissue independent claims	179	710	279	355	Request for Cor		mination (RCE)		
over original patent	169	900	169	900	Request for exp		nination		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Oth	er fee ((specify)	·	of a design appl	lication			
SUBTOTAL (2) \$0.00									
**or number previously paid, if greater, For Reissues, see above	*Red	duced t	y Basic	Filing	Fee Paid	SUBTO	TAL (3)		
SUBMITTED BY Complete (if applicable)									
Name (Print/Type) Peter C. Stomma			ation No y/Agent)	D.	36,020	Telephone	(262) 632-	6900	
Signature						Date	1/25/01		

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